



CITY OF CINCINNATI
DEPARTMENT OF BUILDINGS & INSPECTIONS
Business Development and Permit Center
3300 Central Parkway
Cincinnati, OH 45225
(513) 352-3271 Fax: (513) 352-1598

Permit Application For

HVAC

NUMBER

Part A — Identification

COMPLETE IN INK — PLEASE PRINT

Project Address	Floor/Suite
Owner	Street Address/City/State/Zip
Contractor	Street Address/City/State/Zip
Contact Person	Street Address/City/State/Zip
Phone	Home / Work
Phone	
Phone	/ Fax

Part B — Main Use of Primary Building on Property: (Such as Office, One-Family, Parking Garage, Restaurant, etc.)

Present Use: _____ No. of Dwelling Units _____

Proposed Use: _____ No. of Dwelling Units _____

Part C — Type of Mechanical Equipment

Furnace, Up Flow <input type="checkbox"/> Counter Flow <input type="checkbox"/>	No. Units	Mfg. Name	Model No./Efficiency	Fuel	Input Btuh
Air Cond. Electric <input type="checkbox"/> Gas <input type="checkbox"/>	No. Units	Mfg. Name	Model No./Efficiency	Fuel	H. Btuh
Comb. Htg. & A.C.	No. Units	Mfg. Name	Model No./Efficiency	Fuel	C. Btuh
Heat Pump	No. Units	Mfg. Name	Model No./Efficiency	Fuel	H. Btuh
Boiler, H.W. <input type="checkbox"/> Steam <input type="checkbox"/> Process <input type="checkbox"/>	No. Units	Mfg. Name	Model No./Efficiency	Fuel	C. Btuh
Unit Heater	No. Units	Mfg. Name	Model No./Efficiency	Fuel	H. Btuh
Kitchen Hood & Exhaust Systems	No. Units	Mfg. Name	Model No./Efficiency	Fuel	C. Btuh
Hood Fire Suppression System	No. Units	Mfg. Name	Model No./Efficiency	Fuel	CFM
Fireplaces	No. Units	Mfg. Name	Model No./Efficiency	Fuel	
Other	No. Units	Mfg. Name	Model No./Efficiency	Fuel	

Replacement Unit: Yes ☐ No ☐ (a) Connection to existing wiring: Yes ☐ No ☐ (b) Ductwork: New ☐ Existing ☐

Boilers, Cooling Towers and Related Equipment directly connected to Potable Water System

(a) Backflow Prevention Device used: ASSE 1012 ☐ ASSE 1013 ☐ (b) Chemically Treated System: Yes ☐ No ☐

DESCRIPTIONS OF WORK TO BE DONE, LOCATION OF EQUIPMENT, ALTERATIONS, ETC. _____

Note: A separate application for inspection of electrical work must be filed with Inspection Bureau Inc. (IBI) 250 W. Court St., Cincinnati, Ohio 45202, **Except for 1, 2 & 3 Family Replacement Installations Connected to Existing Branch Circuit.**

Cost of Labor and Materials for this Application Only \$ _____

The owner or agent of this building and undersigned, does hereby certify that the information and statements given on the application, drawings, and specifications are to the best of their knowledge, true and correct. The undersigned further certifies their authorization to grant consent to the inspection by employees of the Department of Buildings and Inspections of the described premises at any time when work on those premises is ongoing and hereby grants that consent.

Applicant's Signature _____

OFFICE USE ONLY BELOW LINE

Route To: _____ Processing Fee _____

APPROVALS:

Zoning _____ Date _____ Building _____ Date _____

COMPLETE FOR NEW ONE, TWO & THREE FAMILY BUILDINGS AND WHERE OTHERWISE APPLICABLE

Floor	NAME OF ROOM	HEAT LOSS	Baseboard Radiation	HEAT GAIN	SUPPLY AIR	RAD- IATION	SUPPLY DUCTS		RETURN DUCTS	
		WARM AIR HOT WATER STEAM	Electric	Air Conditioning	HEATING AND/OR Air Cond.	H.W. OR STEAM	NUMBER OF OUTLETS PER ROOM	AREA	GRILLES FREE AREA	AREA
		Btuh	Btuh	Btuh	C.F.M.	Sq. ft.		Sq. in.	Sq. in.	Sq. in.
TOTAL						(A)		(A)		
BTU per Hr. Register: _____						TOTAL BRANCH AREA (A)				
						TOTAL TRUNK DUCT SIZE (B)		(B)		(B)

ABOVE CALCULATIONS MADE BY _____ ADDRESS _____

OFFICE USE ONLY

Census Tract _____

Zoning District _____

Use Group _____

TYPE OF PERMIT	AMOUNT	ISSUED BY	DATE	NUMBER
HVAC				
WALK THRU				
INVESTIGATION FEE				
OHIO STATE SURCHARGE				